

DRIVING SCHOOL INSURANCE CERTIFICATE

A. POLICYHOLDER INFORMATION:			
TRUE FULL NAME OF POLICYHOLDER		DRIVING SCHOOL NUMBER	
DRIVING SCHOOL NAME		AREA CODE/TELEPHONE NUMBER	
DRIVING SCHOOL ADDRESS	CITY	STATE ZIP CODE	
POLICY NUMBER	EFFECTIVE*		
	FROM	ТО	
B. VEHICLE(S) COVERED BY THIS POLICY:	(Attach a separate OL 20)	7 if additional space is needed.)	
LIC PLT #, YEAR, MAKE AND VIN #	LIC PLT #, YEAR, MAKE AND	LIC PLT #, YEAR, MAKE AND VIN #	
LIC PLT #, YEAR, MAKE AND VIN #	LIC PLT #, YEAR, MAKE AND VIN #		
LIC PLT #, YEAR, MAKE AND VIN #	LIC PLT #, YEAR, MAKE AND VIN #		
C. INSURANCE COMPANY'S CERTIFICATION	I(S):		
INSURANCE COMPANY NAME		AREA CODE/TELEPHONE NUMBER	
MAILING ADDRESS (NUMBER AND STREET)	CITY	STATE ZIP CODE	
I certify (or declare) under penalty of perjury of true and correct. I further certify, the company signatory heret hereby certifies that it has issued to the above the insured, as a driving school with Section relating thereto. I also certify that such policy is in full force an upon the expiration of a thirty day prior written	to, duly authorized to do e policyholder, an insura n 11103 of the California nd effect on the date here	business in the State of California nce policy to assure compliance by a vehicle Code and the regulations of and shall not be cancelled except	
PRINTED NAME OF AUTHORIZED INS. CO. REPRESENTATIVE SIG	GNATURE OF AUTHORIZED INS. CO. REP	RESENTATIVE DATE	

Insurance Requirements (California Vehicle Code)

11103. A driving school owner and an independent instructor licensed under Section 11105.5 shall maintain bodily injury and property damage liability insurance on motor vehicles while being used in driving instruction, insuring the liability of the driving school, the driving instructor, and any person taking instruction in at least the following amounts: one hundred fifty thousand dollars (\$150,000) for bodily injury to or death of one person in any one accident and, subject to the limit for one person, three hundred thousand dollars (\$300,000) for bodily injury to or death of two or more persons in any one accident, and the amount of fifty thousand dollars (\$50,000) for damage to property of others in any one accident.

The owner or instructor shall file evidence of that insurance coverage in the form of a certificate from the insurance carrier with the Department, and the certificate shall stipulate that the insurance shall not be cancelled except upon 30 days' prior written notice to the Department.

*If you choose to enter "continuous" or "until cancelled" in this space, this certificate will remain valid until it has been cancelled or terminated. If a date is entered, a new certificate must be **on file before** that date with the Department of Motor Vehicles to avoid suspension of the driving record.

Please provide a copy of this form to the policyholder and mail the completed form to:

Department of Motor Vehicles Occupational Licensing Section P.O. Box 932342 MS – L224 Sacramento, CA 94232-3420

